

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION**

In re:

Sandra L Bradley

Debtor(s)

Case No. 17-08689

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**CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT**

Glenn Stearns, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 03/20/2017.
- 2) The plan was confirmed on NA.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. § 1329 on NA.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on NA.
- 5) The case was dismissed on 05/19/2017.
- 6) Number of months from filing to last payment: 1.
- 7) Number of months case was pending: 5.
- 8) Total value of assets abandoned by court order: NA.
- 9) Total value of assets exempted: \$3,400.00.
- 10) Amount of unsecured claims discharged without payment: \$0.00.
- 11) All checks distributed by the trustee relating to this case have cleared the bank.

**Receipts:**

Total paid by or on behalf of the debtor	\$21.60
Less amount refunded to debtor	\$20.54

**NET RECEIPTS: \$1.06**

**Expenses of Administration:**

Attorney's Fees Paid Through the Plan	\$0.00
Court Costs	\$0.00
Trustee Expenses & Compensation	\$1.06
Other	\$0.00

**TOTAL EXPENSES OF ADMINISTRATION: \$1.06**

Attorney fees paid and disclosed by debtor: \$0.00

**Scheduled Creditors:**

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
HONOR FINANCE	Secured	0.00	NA	NA	0.00	0.00
NORTHSHORE HEALTH SYSTEM	Unsecured	3,000.00	NA	NA	0.00	0.00
NORTHSHORE HEALTH SYSTEM	Unsecured	1,200.00	NA	NA	0.00	0.00
NORTHSHORE MEDICAL	Unsecured	1,200.00	NA	NA	0.00	0.00
CITY OF CHICAGO	Unsecured	200.00	NA	NA	0.00	0.00
CITY OF CHICAGO	Unsecured	200.00	NA	NA	0.00	0.00
PARK CITY BRANCH COURT	Unsecured	500.00	NA	NA	0.00	0.00
PARK CITY BRANCH COURT	Unsecured	500.00	NA	NA	0.00	0.00
PARK CITY BRANCH COURT	Unsecured	250.00	NA	NA	0.00	0.00
NORTHSHORE HEALTH SYSTEM	Unsecured	3,000.00	NA	NA	0.00	0.00
PINNACLE MANAGEMENT	Unsecured	40.00	NA	NA	0.00	0.00
PINNACLE MANAGEMENT	Unsecured	700.00	NA	NA	0.00	0.00
VIREO EMERGENCY PHYSICIANS	Unsecured	5,000.00	NA	NA	0.00	0.00
CONVERGENT OUTSOURCING	Unsecured	500.00	NA	NA	0.00	0.00
JEFFERSON CAPITAL SYSTEM	Unsecured	1,100.00	NA	NA	0.00	0.00
PROACTIVE	Unsecured	150.00	NA	NA	0.00	0.00
VAN RU CREDIT CORP	Unsecured	50.00	NA	NA	0.00	0.00
PINNACLE MANAGEMENT	Unsecured	110.00	NA	NA	0.00	0.00
LAKE SHORE PATHOLOGISTS	Unsecured	44.00	NA	NA	0.00	0.00
COMED	Unsecured	350.00	NA	NA	0.00	0.00
NICOR GAS	Unsecured	400.00	NA	NA	0.00	0.00
CITY OF CHICAGO	Unsecured	200.00	NA	NA	0.00	0.00
PHOTO ENFORCEMENT	Unsecured	200.00	NA	NA	0.00	0.00
DENTAL EXPERTS	Unsecured	78.00	NA	NA	0.00	0.00
COMCAST	Unsecured	150.00	NA	NA	0.00	0.00
ALPHA PROPERTY MANAGEMENT	Unsecured	347.00	NA	NA	0.00	0.00

**Scheduled Creditors:**

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
CITY OF WAUKEGAN	Unsecured	200.00	NA	NA	0.00	0.00
VISTA MEDICAL CTR EAST	Unsecured	200.00	NA	NA	0.00	0.00
PHOTO ENFORCEMENT PROGRAM	Unsecured	200.00	NA	NA	0.00	0.00
COMCAST	Unsecured	154.00	NA	NA	0.00	0.00
LINEGARGER GOGGAN BLAIR	Unsecured	1,000.00	NA	NA	0.00	0.00
VISTA MEDICAL CENTER EAST	Unsecured	600.00	NA	NA	0.00	0.00
VISTA MEDICAL CENTER EAST	Unsecured	600.00	NA	NA	0.00	0.00
VISTA MEDICAL CENTER EAST	Unsecured	200.00	NA	NA	0.00	0.00
VISTA MEDICAL CENTER EAST	Unsecured	200.00	NA	NA	0.00	0.00
VISTA MEDICAL CENTER EAST	Unsecured	200.00	NA	NA	0.00	0.00
TRANSWORLD SYSTEMS INC	Unsecured	910.00	NA	NA	0.00	0.00
LINEGARGER GOGGAN BLAIR	Unsecured	200.00	NA	NA	0.00	0.00
LINEGARGER GOGGAN BLAIR	Unsecured	200.00	NA	NA	0.00	0.00
PINNACLE MANAGEMENT	Unsecured	110.00	NA	NA	0.00	0.00
VIREO EMERGENCY PHYSICANS	Unsecured	1,240.00	NA	NA	0.00	0.00
CHEX SYSTEMS INC	Unsecured	200.00	NA	NA	0.00	0.00

**Summary of Disbursements to Creditors:**

	<u>Claim Allowed</u>	<u>Principal Paid</u>	<u>Interest Paid</u>
<b>Secured Payments:</b>			
Mortgage Ongoing	\$0.00	\$0.00	\$0.00
Mortgage Arrearage	\$0.00	\$0.00	\$0.00
Debt Secured by Vehicle	\$0.00	\$0.00	\$0.00
All Other Secured	\$0.00	\$0.00	\$0.00
<b>TOTAL SECURED:</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>Priority Unsecured Payments:</b>			
Domestic Support Arrearage	\$0.00	\$0.00	\$0.00
Domestic Support Ongoing	\$0.00	\$0.00	\$0.00
All Other Priority	\$0.00	\$0.00	\$0.00
<b>TOTAL PRIORITY:</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>GENERAL UNSECURED PAYMENTS:</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

**Disbursements:**

Expenses of Administration	<u>\$1.06</u>	
Disbursements to Creditors	<u>\$0.00</u>	
<b>TOTAL DISBURSEMENTS :</b>		<b><u>\$1.06</u></b>

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 08/07/2017

By: /s/ Glenn Stearns

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Trustee

**STATEMENT:** This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.